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**CERTIFICATE OF FACSIMILE TRANSMISSION TO THE  
UNITED STATES PATENT AND TRADEMARK OFFICE**

**DATE:** February 10, 2004

**Examiner:** Sabrina A. Chang : **RE:** U.S. Patent Application  
**Art Unit:** 3625 : **Serial No.:** 09/480,344  
**Fax:** 703-872-9306 : **Applicant:** Kevin Michael Ruppelt et al.  
**From:** Thomas M. Fisher : **Atty. Dkt. No.:** 9D-EC-19337

**DOCUMENTS SUBMITTED WITH TRANSMISSION:**


**Amendment Transmittal (3 pgs.)**  
**Amendment in Response to Office Action dated December 10, 2003**  
**(30 pgs.)**  
**Fax Transmittal (1 pg.)**

**Total pages including cover page: 34**  
**If all pages are not received, please contact: Linda Driscoll at Ext. 7229**

**RE:** The above referenced U.S. Patent Application  
**Title:** METHOD AND APPARATUS FOR PRODUCT SELECTION ASSISTANCE  
**Filed:** January 10, 2000

**CERTIFICATE OF FACSIMILE TRANSMISSION**

I hereby certify that these papers are being facsimile transmitted to the U.S. Patent and Trademark Office,  
Facsimile Number 703-872-9306 on the date shown above.

  
Thomas M. Fisher, Reg. No.: 47,564

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VIA FACSIMILE 1-703-872-9306

PATENT  
Attorney Docket No.: 9D-EC-19337

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	Kevin Michael Ruppelt et al.	:	
Serial No.:	09/480,344	:	Group No.: 3625
Filed:	January 10, 2000	:	Examiner: Sabrina A. Chang
For:	METHOD AND APPARATUS FOR PRODUCT SELECTION ASSISTANCE	:	

Mail Stop: Non-fee amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

## TRANSMITTAL

- Transmitted herewith is:  
Amendment Transmittal (3 pgs.)  
Amendment in response to Office Action dated December 10, 2003 (30 pgs.)  
Fax Transmittal which includes Certificate of Facsimile (1 pg.)

## STATUS

- Applicant  
☐ claims small entity status.  
☒ is other than a small entity.

**EXTENSION OF TERM**

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.

(complete (a) or (b), as applicable)

- (a) ☐ Applicant petitions for an extension of time under 37 C.F.R. 1.136  
(Fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)

Extension for response within:	Other than small entity Fee	Small entity Fee (if applicable)
<input type="checkbox"/> first month	\$ 110.00	\$ 55.00
<input type="checkbox"/> second month	\$ 420.00	\$ 210.00
<input type="checkbox"/> third month	\$ 950.00	\$ 475.00
<input type="checkbox"/> fourth month	\$1,480.00	\$ 740.00
<input type="checkbox"/> fifth month	\$2,010.00	\$1,005.00

Fee Due \$ \_\_\_\_\_

If an additional extension of time is required, please consider this a petition therefor.

(Check and complete the next item, if applicable)

- ☐ An extension of \_\_\_\_\_ months has already been secured. The fee paid therefor \$ \_\_\_\_\_ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$ \_\_\_\_\_.

OR

- (b) ☒ Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

**FEE FOR CLAIMS**

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT	(Col. 2) HIGHEST NO. PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA	SMALL ENTITY ADDITIONAL RATE FEE	OR	OTHER THAN SMALL ENTITY ADDITIONAL RATE FEE
TOTAL		MINUS	=	x \$9 = \$		x \$18 = \$
INDEP.		MINUS	=	x \$43 = \$		x \$86 = \$
	FIRST PRESENTATION OF MULTIPLE DEP. CLAIM			+ \$145 = \$		+ \$290 = \$

TOTAL ADDITIONAL FEE \$	OR	TOTAL ADDITIONAL FEE \$
----------------------------	----	----------------------------

- (a) ☒ No additional fee for Claims is required

OR

- (b) ☐ Total additional fee for claims required \$

**FEE PAYMENT**


5. Attached is a check in the sum of \$\_\_\_\_\_
- ☐ Charge Deposit Account No. 01-2384 the sum of \$\_\_\_\_\_.

**FEE DEFICIENCY**

6. ☒ If any additional extension and/or fee is required, charge Deposit Account No. 01-2384.

AND/OR

- ☒ If any additional fee for claims is required, charge Deposit Account No. 01-2384.
7. ☐ Other:

  
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Reg. No. 47,564  
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	:	Art Unit: 3625
Serial No.: 09/480,344	:	
	:	Examiner: Sabrina A. Chang
Filed: January 10, 2000	:	
	:	
For: METHOD AND APPARATUS	:	
FOR PRODUCT SELECTION	:	
ASSISTANCE	:	

AMENDMENT

Mail Stop: Non-fee amendment  
Hon. Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In response to the Office Action dated December 10, 2003, please amend the above identified application as follows.